



03/17/06 356-64615-01 500776

PATENT
Attorney Reference Number 356-64615-01

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Shawn R. Irwin et al.

Application No. 10/734,068

Filed: December 10, 2003

Confirmation No. 1846

For: MODULAR DENTAL CHAIR
EQUIPMENT MOUNTING SYSTEM

Examiner: Anita M. King

Art Unit: 3636

Attorney Reference No. 356-64615-01

CERTIFICATE OF MAILING

I hereby certify that this paper and the documents referred to as being attached or enclosed herewith are being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: MAIL STOP AMENDMENT
COMMISSIONER FOR PATENTS, P.O. BOX 1450,
ALEXANDRIA, VA 22313-1450 on the date shown below.

Attorney or Agent
for Applicant(s)

Date Mailed March 20, 2006

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TRANSMITTAL LETTER

Enclosed is an Amendment for the above application. The fee has been calculated as shown below.

CLAIMS AS AMENDED					
For	No. after amendment	No. paid for previously	Present Extra	Rate	Fee
Total Claims	21	- 69*	= 0	\$50.00	\$0.00
Indep. Claims	3	- 11**	= 0	\$200.00	\$0.00
Mult. Dep. Claims Fee (if not previously paid)				\$360.00	\$0.00
One-month Extension of Time				\$120.00	\$120.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$120.00

* greater of twenty or number for which fee has been paid.

** greater of three or number for which fee has been paid.

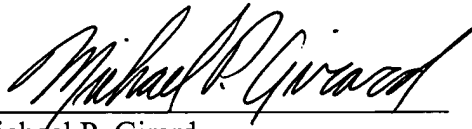
- ☒ Also enclosed is a copy of the Information Disclosure Statement filed April 19, 2005.
- ☒ Applicants petition for an extension of time for the number of months indicated above. If an additional extension of time is required please consider this a petition therefor.
- ☒ A check in the amount of \$120.00 is attached.

- ☒ Please charge any additional fees that may be required in connection with filing this amendment and any extension of time, or credit any overpayment, to Deposit Account No. 02-4550. A copy of this sheet is enclosed.
- ☒ If the Patent and Trademark Office determines that this amendment results in an additional application size fee for pages in excess of 100, please charge the fee to Deposit Account No. 02-4550. A copy of this sheet is enclosed.
- ☒ Please return the enclosed postcard to confirm that the items listed above have been received.

Respectfully submitted,

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By



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cc: Docketing